

HANDLER SIGN-UP FORM

Concerning Participation in the Proposed California Leafy Green Products Handler Marketing Agreement

DEPARTMENT OF FOOD AND AGRICULTURE
Marketing Branch
P.O. Box 942871
Sacramento, CA 94271-0001



**SIGN-UP
DEADLINE
MAY 18, 2007**

1. Read the California Leafy Green Products Handler Marketing Agreement, which can be found at <http://www.caleafygreens.ca.gov>.
2. Review the definition stated below to verify your eligibility to sign up as a Leafy Green Products handler:

Handler means any person who handles, processes, ships or distributes leafy green products (iceberg lettuce, romaine lettuce, red leaf lettuce, butter lettuce, baby leaf lettuce (i.e., immature lettuce or leafy greens), escarole, endive, spring mix, spinach, cabbage, kale, arugula or chard) for market whether as owner, agent, employee, broker or otherwise.
3. If you wish to participate in the proposed California Leafy Green Products Marketing Agreement, you must: 1) check the box in the Sign-up Section, and report the number of cartons of leafy green products your firm handled during the period April 1, 2005 through March 31, 2006, and 2) complete the Certification Section. Volume information will be used to assess the sign-up and your information will be kept confidential. **If you do not wish to participate, there is nothing further for you to do.**
4. Those interested in participating in this Agreement should return this completed sign-up form to the Department of Food and Agriculture **postmarked or otherwise received by May 18, 2007**. You can mail the document to the address above, fax it to (916) 341-6826, or email it to RCasillas@cdfa.ca.gov.

SIGN-UP SECTION

Check the box below to become a participant in the California Leafy Green Products Handler Marketing Agreement and report total cartons of leafy greens handled on the following line.

I HEREBY **AGREE TO PARTICIPATE** IN THE CALIFORNIA LEAFY GREEN PRODUCTS HANDLER MARKETING AGREEMENT.

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Total cartons of leafy green products handled April 1, 2005-March 31, 2006 _____

CERTIFICATION SECTION

By signing below I hereby certify that the person or entity named on this form is an eligible leafy green products handler in California. I do further certify that I am authorized to complete this form and that the information I provide, including the volume of leafy green products sold, is correct to the best of my knowledge.

Date Type or Print Name Signature

Telephone Business Entity Legal Name

Address City State ZIP